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CONFIRMATION NO. 3965

|  |   |                                      |   |   |                                    |
|--|---|--------------------------------------|---|---|------------------------------------|
| <b>SERIAL NUMBER</b><br>10/588,966   | <b>FILING or 371(c)<br/>DATE</b><br>08/10/2006<br><br><b>RULE</b>   | <b>CLASS</b><br>370                  | <b>GROUP ART UNIT</b><br>4113   | <b>ATTORNEY DOCKET<br/>NO.</b><br>1248-0889PUS1 |                                    |
| <b>APPLICANTS</b><br>Mitsunori Tanaka, Ichikawa-shi, JAPAN;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/JP05/02048 02/10/2005<br><b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 2004-036882 02/13/2004<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>04/18/2007 |   |                                      |   |   |                                    |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/MICHAEL Y MAPA/</u><br>Examiner's Signature                            | <input type="checkbox"/> Met after Allowance<br>Initials  | <b>STATE OR<br/>COUNTRY</b><br>JAPAN | <b>SHEETS<br/>DRAWINGS</b><br>6   | <b>TOTAL<br/>CLAIMS</b><br>16                   | <b>INDEPENDENT<br/>CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>BIRCH STEWART KOLASCH & BIRCH<br>PO BOX 747<br>FALLS CHURCH, VA 22040-0747<br>UNITED STATES  |   |                                      |   |   |                                    |
| <b>TITLE</b><br>Wireless communications system, transmitting device, receiving device, wireless communications system controlling method, and wireless communications system controlling program and storage medium storing same   |   |                                      |   |   |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>900  | FEES: Applicant has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                      | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                    |